

**EPI Update for Friday, April 22, 2011**  
**Center for Acute Disease Epidemiology (CADE)**  
**Iowa Department of Public Health (IDPH)**

**Items for this week's EPI Update include**

- **Measles update**
- **Hantavirus testing**
- **Health advice before international travel**
- **Child and adolescent immunization schedule**
- **Meeting announcements and training opportunities**

**Measles update**

Minnesota continues to identify measles cases. As of Thursday, there have been 21 confirmed cases with ages ranging from 4 months to 51 years old, 13 hospitalizations, and no deaths. This outbreak highlights the importance of measles immunizations prior to travel abroad. Seventeen of the cases have been linked to a case that was exposed to measles in Kenya, one exposed to measles in India, one in Florida, and one has an unknown source of exposure.

In Iowa, a family was exposed to measles during an international flight returning from India. Home quarantine was put into place; fortunately, testing quickly determined that the family members were immune and quarantine was lifted less than 24 hours later.

For instructions on follow-up of a possible measles patient, see the April 1 EPI Update at [www.idph.state.ia.us/IdphArchive/Archive.aspx?channel=EpiUpdate](http://www.idph.state.ia.us/IdphArchive/Archive.aspx?channel=EpiUpdate).

## **Hantavirus Testing**

Cases of Hantavirus Pulmonary Syndrome (HPS) rarely occur in Iowa. Infected rodents, such as deer mice, shed the virus in urine, droppings, and saliva. When the virus is aerosolized (droppings or nesting materials are stirred up), a person can be exposed by breathing the contaminated air. HPS can be diagnosed by serology testing looking for antibodies to the virus.

Recently, three patients were told they had HPS based on a positive antibody test. Upon further investigation, the patients did NOT have HPS. The antibody test, performed by a commercial lab, is a “screening test” and is specifically designed to detect as many potential infections as possible. However, it lacks specificity, resulting in many false positive tests. Thus, any positive results from these screening tests must be confirmed for a definitive diagnosis. SHL offers a specific serology testing for Hantavirus which can serve as a confirmation for this commercial screening test.

## **Health advice before international travel**

Seeking health advice prior to traveling abroad is recommended, including updating routine (“childhood”) immunizations, and assessing the need for non-routine immunizations and for preventive medications such as anti-malarial drugs.

Clinicians can review the appropriate recommendations for their patients by using the newly updated “CDC Health Information for International Travel 2010” at [wwwnc.cdc.gov/travel/content/yellowbook/home-2010.aspx](http://wwwnc.cdc.gov/travel/content/yellowbook/home-2010.aspx), and for a health care checklist to share with your travelling patients, visit [www.idph.state.ia.us/Cade/common/pdf/health\\_guidance\\_international\\_travel.pdf](http://www.idph.state.ia.us/Cade/common/pdf/health_guidance_international_travel.pdf)

## **Child and adolescent immunization schedule**

With recent outbreaks of pertussis and measles highlighting the importance of vaccination, please note the updated child and adolescent immunization schedule for 2011 is available at [www.idph.state.ia.us/ImmTB/Immunization.aspx?prog=Imm&pg=Schedule](http://www.idph.state.ia.us/ImmTB/Immunization.aspx?prog=Imm&pg=Schedule).

Changes in the schedule include:

- Clarification of the hepatitis B vaccine schedule for children.
- Recommendations on the use of 13-valent pneumococcal conjugate vaccine.
- Clarification of the administration of one or two doses of seasonal influenza vaccine based upon the child’s history of monovalent 2009 H1N1 vaccination.
- Use of tetanus and diphtheria toxoids, and acellular pertussis (Tdap) vaccine among children aged 7 through 10 years who are incompletely vaccinated against pertussis.
- Reference to a specified interval between tetanus and diphtheria toxoids (Td) and Tdap vaccination has been removed.
- A routine two-dose schedule of quadrivalent meningococcal conjugate vaccine (MCV4) for certain persons at high risk for meningococcal disease. Recommendations for a booster dose of MCV4 have been added.

## **Meeting announcements and training opportunities**

The Biosafety Laboratory Competencies.

These competencies were released on April 14 as a result of the efforts of many very knowledgeable individuals around the country, including Iowa's SHL. For more information, visit [www.cdc.gov/mmwr/pdf/other/su6002.pdf](http://www.cdc.gov/mmwr/pdf/other/su6002.pdf).

35<sup>th</sup> Iowa Infection Prevention and Control Seminar

May 3 to 4, Gateway Hotel & Convention Center, Ames, Iowa. The seminar will cover infection control and patient safety issues. For more information, visit [www.continuetolearn.uiowa.edu/UIconferences/](http://www.continuetolearn.uiowa.edu/UIconferences/).

## **Have a healthy and happy week!**

Center for Acute Disease Epidemiology

Iowa Department of Public Health

800-362-2736